

<b>CLAIMS ONLY</b>							SERIAL NO.	FILING DATE
							APPLICANT(S) <div style="text-align: center; font-family: cursive;">09989994</div>	
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.	*	*
1	1							
2		1						
3		1						
4		1						
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47		1						
48		1						
49		1						
50								
TOTAL IND.	1	48						
TOTAL DEP.								
TOTAL CLAIMS	49							

  

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMMENDMENTS